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## REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional) 3255.1US (91-507.1-RE)

	Claims as Filed - Part 1		
Number Filed in (3) Small Entity Other than a Small En	ntity		
Patent For Reissue Application Number Extra Rate Fee Rate Fee			
(A) Total Claims (B) **** =   x \$ =			
(37 CFR 1.16(j)) Independent (D)	· · ·		
Independent (D) = x \$ = x \$ =			
OCT 2 5 2000 B  Basic Fee (37 CFR 1.16(h)) s			
Total Filing Fee \$ OR \$			
Claims as Amended - Part 2			
(1) (2) (3) Small Entity Other than a Small E	Entity		
lac Amandana Y Proviously Claims	ee		
Total Claims ***	0		
Independent	0		
Total Additional Fee \$ OR \$1,15			
** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.  *** After any cance lation of claims  *****- If "A" is greater than 20, use (B -A); if "A" is 20 or less, use (B - 20).  ****** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).			
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